APPLICATION FOR DEVELOPMENT REVIEW



COUNTY OF APPOMATTOX

DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT

APPLICATION REQUIREMENTS

- 1. *Consultation* with the County planning staff to review the feasibility of the proposal and to obtain recommended procedures and technical assistance. Applicant is encouraged to contact adjoining property owners to inform them of the proposal.
- 2. Application must be legible and signed by property owner, contract purchaser, or owner's agent. If applicant is not the property owner, owner's authority letter must be supplied.
- 3. Justification stating in general terms the change in use of the property, the effect of the changes on the surrounding area, the reasons for the request, the consistency of the request with the Comprehensive Plan, and the consistency of the request with the general purposes of the Zoning Ordinance and the purpose stated at the beginning of the applicable district regulations.
- 4. Concept Plan of the proposed project and concept plan checklist must be submitted with the application. Plan must be $8\frac{1}{2}$ "X 11".
- 5. Metes and bounds description must accompany rezoning and conditional use permit application.
- 6. Highway Entrance Permits and Approved Water/Sewer Permits must accompany rezoning and conditional use permit application, if applicable.
- 7. List of adjoining property owners including owner's names, addresses (mailing address including zip code) and tax map numbers of all adjacent properties must accompany application, including those in adjacent jurisdictions. (Refer to tax records in the County Commissioner of Revenue's office or office in appropriate jurisdiction).
- 8. Application fees must accompany application and are as follows:

Rezoning \$300 Variance \$200 Conditional Use \$200 Appeal of Decision \$200

For further information or assistance, please contact us at:

Appomattox County Department of Community

 & Economic Development
 Phone: (434)352-8183

 175 Morton Lane
 Fax: (434) 352-4214

Appomattox, VA 24522 E-mail: johnnie.roark@appomattoxcountyva.gov

ALL REQUIRED ITEMS MUST BE SUBMITTED BEFORE THE APPLICATION DEADLINE

APPLICATION DEADLINE IS NO LATER THAN 4:30 P.M. ON THE 15TH OF THE MONTH. IF THE 15TH FALLS ON A WEEKEND OR HOLIDAY, THEN APPLICATIONS WILL BE ACCEPTED THROUGH 4:30 P.M. ON THE NEXT BUSINESS DAY.

Additional Information:

COUNTY OF APPOMATTOX

Department of Community & **Economic Development** 175 Morton Lane Appomattox, VA 24522

(434) 352-8183 Fax: (434) 352-4214

E-Mail: johnnie.roark@appomattoxcountyva.gov

For staff use only

date received: received by: application fee: \$ PC date: File Number: BZA date:

BOS date:

ALL APPLICATIONS				
Check type of application filed (check all that a	pply):			
REZONING CONDITIONAL USE	VARIANCE	☐ APPEAL		
Applicant's Name:		Phone:		
••		Fax:		
Address:		E-Mail:		
		Zip Code:		
NOTE: IF NOT THE SAME AS OWNER, I	MUST SUBMIT SIGNI	ED OWNERS AUTHORITY LETTER.		
Owner's Name:		Phone:		
		Fax:		
Address:		E-Mail:		
		Zip Code:		
Authorized Agent:		Phone:		
rumonzeu rigent.		Fax:		
Address:		E-Mail:		
Tada ess.		Zip Code:		
		r		
NOTE: IF NOT THE SAME AS OWNER, I	MUST SUBMIT SIGNI	ED OWNERS AUTHORITY LETTER.		
Engineer:		Phone:		
		Fax:		
Address:	E-Mail:			
		Zip Code:		
Location of Property: (Directions from Appom	attox)			
Tax Map Number(s):				
Magisterial District:				
Size of Parcel(s):	Existing Zoning:			
Acres				
Sq. Ft.	Existing Land Use:			
Amount of Area to be utilized	-			

REZONING AND CONDITIONAL USE PERMIT APPLICATION (R/C)					
Current Zoning:					
Proposed Zoning:		For Staff use only			
Proposed Land Use:		Use Type:			
Does the parcel meet the minimum lot area, width, and frontage requirements of the requested district? ☐ Yes ☐ No					
Does the parcel meet the minimum criteria for the requested use type? \Box Yes \Box No If NO, a variance is required first.					
If rezoning or conditional use request If YES, copy must be attached.	sts, are conditions	s being proffered wit	h this request	? □Yes □ No	
VARIANCE APPLICATION (V)					
Variance of Section(s)	of the Appoma	attox County Zoning	Ordinance in	order to:	
Is the application complete? □Yes □ No Please check if enclosed. APPLICATION WILL NOT BE ACCEPTED IF ANY OF THESE ITEMS ARE MISSING OR INCOMPLETE.					
Check off completed items:					
ITEMS	Rezoning	Conditional Use	Variance	Appeal	
Consultation					
Application					
Justification					
8 ½" x 11" concept plan					
Metes and bounds description					
Water and Sewer permits					
VDOT Entrance Permit					
Application Fee					
Proffers, if applicable					
Adjoining property owners					
Owners Authority Letter					
I hereby certify that I am either the owner of the property or the owner's agent or contract purchaser and acting with the knowledge and consent of the owner. Owner/Agent Signature:					

JUSTIFICATION FOR REZONING OR CONDITIONAL USE PERMIT Applicant: The Planning Commission will study rezoning and conditional use permit requests to determine the need and justification for the change in terms of public health, safety, and general welfare. Please answer the following questions as thoroughly as possible. Use additional space if necessary. Please explain how the request furthers the purposes of the Zoning Ordinance as well as the purpose found at the beginning of the applicable zoning district classification in the zoning ordinance. Please explain how the project conforms to the general guidelines and policies contained in the Appomattox **County Comprehensive Plan.** Please describe the impact(s) of the request on the property itself, the adjoining properties, and the surrounding area, as well as, the impacts on public services and facilities, including water/sewer, roads, schools, parks/recreation, and fire/rescue.

CONCEPT PLAN CHECKLIST

A concept plan of the proposed project must be submitted within the application. The concept plan shall graphically depict the land use change, development, or variance that is to be considered. Further, the plan shall address any potential land use or design issues arising from the request. In such cases, involving rezonings, the applicant may proffer conditions to limit the future use and development of the property and by so doing, correct any deficiencies that may not be manageable by County permitting regulations.

The concept plan should not be confused with the site plan or plot plan that is required prior to the issuance of a building permit. Site plan and building permit procedures ensure compliance with State and County development regulations and may require changes to the initial concept plan. Unless limiting conditions are proffered and accepted in a rezoning or imposed on a conditional use permit or variance, the concept plan may be altered to the extent permitted by zoning district and other regulations.

A concept plan is required with all rezonings, conditional use permit, and variance applications. The plan should be prepared by a professional site planner. The level of detail may vary, depending on the nature of the request. The County planning staff may exempt some of the items or suggest the addition of extra items, but in general, the following are considered minimum:

ALL APPLICANTS

- a. Applicant name and name of development.
- b. Date, scaled, and north point of plan.
- c. Lot size, in acres or square feet and dimensions.
- d. Location, names of owners, and tax map numbers of all adjoining properties.
- e. Physical features such as ground cover, natural watercourses, floodplains, etc.
- f. The zoning and land use of all adjacent properties.
- g. All property lines and easements.
- h. All buildings, existing and proposed, and dimensions, floor area and heights.
- i. Location, widths, and names of all existing or platted streets or other public ways within or adjacent to the development.
- j. Dimensions and location of all driveways, parking spaces and loading spaces.

Additional information required for REZONING AND CONDITIONAL USE PERMITS

- k. Show existing utilities (water, sewer, storm drains) and connections at the site.
- 1. Any driveways, entrance/exits, curb openings, and crossovers.
- m. Topography map on a suitable scale and contour intervals.
- n. Approximate street grades and site distances at all intersections.
- o. Locations of all adjacent fire hydrants.
- p. Please submit any proffered conditions at the site and how they are addressed.
- q. If project is to be phased, please show phasing schedule.

I certify that all items required in the checklist above are complete.

Signature of applicant

OWNERS AUTHORITY LETTER

STATE OF VIRGINIA

CITY/COUNTY OF	
Thisday of	
I,	, the owner of
(Describe land by Parcel Identification Num	aber) make, constitute, and appoint
my true and lawful agent and in my name, p	place, and stead giving unto said
full power and authority to do and perform	all acts and make all representation necessary, without any limitations
whatsoever, to make application for said rez	coning/conditional use permit/variance (circle one). The right, powers, and
authority of said agent herein granted shall of	commence and be in full force and effect on,
, and shall i	remain in full force and effect thereafter until actual notice, by certified mail,
return receipt requested, is received by the A	Appomattox County Department of Community & Economic Development
stating that the terms of this power have bee	n revoked or modified.
	Owner
COMMONWEALTH OF VIRGINIA:	
County of	
Subscribed and sworn to before me this _ and State aforesaid, by the aforenamed Prin	day of, in my County cipal.
	Notary Public
My Commission Expires:	
	Office Use Only
File Number	Date Accepted .

ADJACENT PROPERTY OWNERS AFFIDAVIT

STATE OF VIRGINIA CITY/COUNTY OF	<u> </u>
This day of	
I, obtained concurrent with this application, including any subject area, is a true and accurate list as submitted with r	_, hereby make oath that the list of surrounding property owners, adjoining jurisdictions within one-half mile of all portions of the my application.
	Owner/Contract Purchaser/Authorized Agent (Circle One)
COMMONWEALTH OF VIRGINIA:	
County of	
Subscribed and sworn to before me thisday State aforesaid, by the aforenamed Principal.	of, in my County and
	Notary Public
My Commission expires:	
OFFIC	CE USE ONLY
File Number	Date Accepted,

List of Adjoining Property Owners

Tax Map #	Name	Address
		
		